## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

200404

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
T-/	OTAL CLAIMS	<del></del>			(Coldinit 2)					OR 7		
TOTAL CLAIMS			29		·		L	RATE	FEE	4	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			29 minus 20=		• 9			X\$ 9=		OR	X\$18=	162
INDEPENDENT CLAIMS				nus 3 =	*			X43=		OR	X86=	
ΜL	JLTIPLE DEPEI	NDENT CLAIM P	RESENT	· · · · · · · · · · · · · · · · · · ·				+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	432
CLAIMS AS AMENDED - PART II											OTHER	THAN
	<del>/ "-</del>	(Column 1)		(Colur		(Column 3)	·	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF MI	Minus	***	CI AINA	=		X43=		OR	X86=	
L.	FIRST PRESE	ENTATION OF WI	JETIPLE DEF	ENDENT	CLAIM			+145=		OR	+290=	
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
			)			ADDII. 1 EE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		. =		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								+145= TOTAL	,		TOTAL	•
		•	AD	DIT FEE L		OR	ADDIT. FEE	<del></del>				
		(Column 1)		(Colum		(Column 3)		•				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA			ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	•
**	the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	· ADI	TOTAL DIT. FEE		OR ,	TOTAL DDIT. FEE	
		nber Previously Paid					found	in the appr	opriate box	in colu	ımn 1.	